



MISSOURI

DIVISION OF MEDICAL SERVICES

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Therapy/Rehab Center/Augmentative Communication Team/Site/Home Health Bulletin

Due to budget constraints, paper copies of bulletins will no longer be distributed by DMS. Bulletins are now available only at the [DMS Website](http://www.dss.state.mo.us/dms).

Bulletins will remain on this site only until incorporated into the [provider manuals](#) as appropriate, then deleted.

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MC+ MANAGED CARE

The information contained in this bulletin applies to coverage by the MC+ fee-for-service and Medicaid fee-for-service programs. The MC+ fee-for-service and Medicaid fee-for-service programs also provide coverage for those services carved out of the MC+ Managed Care benefit for MC+ Managed Care enrollees. Questions regarding services included in the MC+ Managed Care benefit should be directed to the enrollee's MC+ Managed Care health plan. Please check the patient's eligibility status prior to delivering a service.

HIPAA

To prepare for the mandatory implementation of Health Insurance Portability and Accountability Act (HIPAA) standards, DMS has redefined how individual therapists, augmentative communication teams/site, home health agencies, and rehabilitation centers *must* bill for services.

HIPAA mandates that states allow providers to bill for services using the standard CPT code sets, however, it does *not* require states to add coverage for services that it does *not* currently cover.

This bulletin contains important information regarding the changes in codes covered and elimination of state specific modifiers. DMS has updated CPT codes to comply with HIPAA mandates.

Individually enrolled Medicaid therapists, school districts, home health agencies, and rehabilitation centers *must* begin billing for service coverage based on HIPAA compliant CPT code definitions for date of service on or after August 15, 2003.

Refer to Attachments A, B, C and D for the lists of codes by Type of Service (TOS) which have been deleted, added, or revised. Refer to Attachment A for the list of codes by TOS which have been deleted. Providers *must* use the appropriate covered code shown on Attachments B, C and D for date of service on or after August 15, 2003.

Providers who bill for a full or partial Healthy Children and Youth (HCY) screen must refer to EPSDT Bulletin Vol. 25 No. 1 dated June 12, 2003 for updates to the W0025 codes used for billing an HCY screen. Effective October 16, 2003 the W0025 codes with modifiers are no longer covered.

MODIFIERS

The YG and WQ modifiers have been deleted. All claims for dates of service on or after August 15, 2003 with the YG or WQ modifier will be denied.

DMS has added two modifiers to indicate Individualized Education Plan (IEP) and Individualized Family Service Plan (IFSP) services. Any therapy services identified in the IEP or IFSP *must* be billed with the TM (IEP) or TL (IFSP) modifier. An independently enrolled therapy provider may not use the TM (IEP) or TL (IFSP) modifiers. IFSP therapy services can only be billed by a First Steps Provider and IEP therapy services can only be billed by the School District for dates of service on or after August 15, 2003.

AUGMENTATIVE COMMUNICATION DEVICE TRAINING

Procedure code G0198 is no longer a valid code for dates of services on or after August 15, 2003. This code has been replaced with procedure codes 92606 and 92609. All claims and prior authorizations for dates of services August 15, 2003 and after must show procedure 92606 or 92609. Augmentative Communication Device training must continue to be billed with the type of service '9'.

REHABILITATION CENTER STUMP CONDITIONING

Procedure code Y3001 is no longer a valid code for claims with dates of service on or after August 15, 2003. Claims for stump conditioning on or after August 15, 2003, must use procedure code 97601 for conditioning, and the appropriate CPT therapy modality procedure code for the exercising of the stump.

SCHOOL BASED SERVICES

Effective for dates of service on or after August 15, 2003, school districts must enroll in Medicaid to bill the evaluations or services for speech, physical, and occupational therapy, when the medical necessity for any or all of those services are documented in the eligible Medicaid child's Individualized Education Program (IEP). School districts that provide IEP physical therapy, occupational therapy, or speech/language therapy must now enroll as a Medicaid provider. Any therapy evaluations or services provided in the school district as part of an IEP must be billed using the school district's Medicaid therapy provider number(s).

Individual therapists, rehabilitation centers, and home health agencies can no longer bill IEP therapy evaluations or services under their individual provider numbers for any dates of service on or after August 15, 2003. Medicaid therapy provider numbers with a pay back to the school district will be closed effective August 14, 2003.

Each school district will be required to enroll as a Medicaid therapy provider. An enrollment process and an application form has been developed that each district must complete and submit for each therapy type (physical, occupational and speech/language).

School districts must require their therapist to complete and sign a DMS questionnaire and agreement. School districts will be required to obtain, and maintain a copy of the therapist's current permanent license/certification and annual renewal of license/certification as stated in the therapy program manual. **This information must be maintained by the school district.** Therapy assistants and aides cannot enroll as a Missouri Medicaid provider therefore, services provided by a therapy assistant or an aide would not be covered by Medicaid. The school district will submit claims to the Medicaid fiscal agent with the appropriate school district's therapy provider number (PT,OT,ST) for services provided to students who are Medicaid eligible for medically necessary IEP therapy services.

The Department of Elementary and Secondary Education, Division of Special Education has awarded a contract to Karri Thurman to assist in the enrollment process for school-based Medicaid service providers. School districts may contact Karri Thurman at (573) 760-0154 or via e-mail at Karrit_2000@yahoo.com for assistance with the Medicaid enrollment process.

PLACE OF SERVICE

The place of service codes '97' (Non Public Schools) and '98' (Public Schools) are state specific codes. Effective for claims submitted August 15, 2003, and after all claims for services provided in a school setting must be billed with HIPAA compliant place of service code '03' (school).

IEP AND IFSP SERVICES PROVIDED BY HOME HEALTH AGENCIES

Effective for dates of service on or after August 15, 2003, DMS will no longer reimburse Home Health agencies for physical, occupational and speech therapy evaluations and services, if these services are, documented in the eligible Medicaid child's IEP or IFSP.

Home Health agencies must contact :

- The individual school districts to make arrangements for services provided to a child as a result of the child's IEP.

- Services for Medicaid clients documented in an IFSP: Central Finance Office Provider Enrollment, C/O Covansys Software Services, Inc., P.O. Box 29134, Shawnee Mission, KS 66201-1934, 1-866-711-2573, Ext 2 or FAX 913-888-6683 regarding

Provider Communications
(800) 392-0938
or
(573) 751-2896

Attachment A**DELETED CODES**

TOS	Procedure code
9	G0198
M, K	92506YG
M, K	92506WQ
M, K	92507YG
M, K	92507WQ
M, K	92508YG
M, K	92508WQ
M, K	97110YG
M, K	97110WQ
M, K	97535YG
M, K	97535WQ
M, K	97703YG
M, K	97703WQ
M, K	97750YG
M, K	97750WQ
K	99205W2
M	E1399
K	E1399YG
K	Y3001
Z	Y2310WQ
Z	Y2315WQ
Z	Y2320WQ
Z	W0027WQ
Z	W0028WQ
Z	W0029WQ

Attachment B**THERAPY CODES**
EFFECTIVE AUGUST 15, 2003

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
92506	M K	0-20 0-125	\$10.00
92507	M K	0-20 0-125	\$10.00
92508	M K	0-20 0-125	\$3.00
92510	M K	0-20	\$10.00
92606 92609	9	0-125, Prior Authorization	\$12.50
97001	M K	0-20 0-125	\$10.00
97002	M K	0-20 0-125	\$10.00
97003	M K	0-20 0-125	\$10.00
97004	M K	0-20 0-125	\$10.00
97010	M K	0-20 0-125	\$10.00
97012	M K	0-20 0-125	\$10.00
97014	M K	0-20 0-125	\$10.00
97016	M K	0-20 0-125	\$10.00
97018	M K	0-20 0-125	\$10.00

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
97020	M K	0-20 0-125	\$10.00
97022	M K	0-20 0-125	\$10.00
97024	M K	0-20 0-125	\$10.00
97026	M K	0-20 0-125	\$10.00
97028	M K	0-20 0-125	\$10.00
97032	M K	0-20 0-125	\$10.00
97033	M K	0-20 0-125	\$10.00
97034	M K	0-20 0-125	\$10.00
97035	M K	0-20 0-125	\$10.00
97036	M K	0-20 0-125	\$10.00
97039	M K	0-20, Progress Notes 0-125, Progress Notes	MP
97110	M K	0-20 0-125	\$10.00
97112	M K	0-20 0-125	\$10.00
97113	M K	0-20 0-125	\$10.00
97116	M K	0-20 0-125	\$10.00
97124	M K	0-20 0-125	\$10.00

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
97139	M K	0-20, Progress Notes 0-125, Progress Notes	MP
97140	M K	0-20 0-125	\$10.00
97504	M K	0-20 0-125	\$10.00
97520	M K	0-20 0-125	\$10.00
97530	M K	0-20 0-125	\$10.00
97532	M K	0-20 0-125	\$10.00
97533	M K	0-20 0-125	\$10.00
97535	M K	0-20 0-125	\$10.00
97542	M K	0-20 0-125	\$10.00
97545	M K	0-20, Progress Notes 0-125, Progress Notes	MP
97546	M K	0-20, Progress Notes 0-125, Progress Notes	MP
97601	K	0-125	\$11.00
97703	K	0-125	\$8.25

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
97750	M K	0-20 0-125	\$10.00
97799	M K	0-20, Progress Notes 0-125, Progress Notes	MP
99205	K	0-125	\$32.00
T1999	M K	0-20 0-125	MP

Attachment C**IEP CODES**
EFFECTIVE AUGUST 15, 2003

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
92506TM	M K	0-20	\$10.00
92507TM	M K	0-20	\$10.00
92508TM	M K	0-20	\$3.00
92510TM	M K	0-20	\$10.00
97001TM	M K	0-20	\$10.00
97002TM	M K	0-20	\$10.00
97003TM	M K	0-20	\$10.00
97004TM	M K	0-20	\$10.00
97010TM	M K	0-20	\$10.00
97012TM	M K	0-20	\$10.00
97014TM	M K	0-20	\$10.00
97016TM	M K	0-20	\$10.00
97018TM	M K	0-20	\$10.00
97020TM	M K	0-20	\$10.00
97022TM	M K	0-20	\$10.00
97024TM	M K	0-20	\$10.00

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
97026TM	M K	0-20	\$10.00
97028TM	M K	0-20	\$10.00
97032TM	M K	0-20	\$10.00
97033TM	M K	0-20	\$10.00
97034TM	M K	0-20	\$10.00
97035TM	M K	0-20	\$10.00
97036TM	M K	0-20	\$10.00
97039TM	M K	0-20, Progress Notes	MP
97110TM	M K	0-20	\$10.00
97112TM	M K	0-20	\$10.00
97113TM	M K	0-20	\$10.00
97116TM	M K	0-20	\$10.00
97124TM	M K	0-20	\$10.00
97140TM	M K	0-20	\$10.00
97139TM	M K	0-20, Progress Notes	MP
97504TM	M K	0-20	\$10.00

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
97520TM	M K	0-20	\$10.00
97530TM	M K	0-20	\$10.00
97532TM	M K	0-20	\$10.00
97533TM	M K	0-20	\$10.00
97535TM	M K	0-20	\$10.00
97542TM	M K	0-20	\$10.00
97545TM	M K	0-20, Progress Notes	MP
97546TM	M K	0-20, Progress Notes	MP
97703TM	K	0-20	\$8.25
97750TM	M K	0-20	\$10.00
97799TM	M K	0-20, Progress Notes 0-20, Progress Notes	MP

Attachment D**IFSP CODES**
EFFECTIVE AUGUST 15, 2003

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
92506TL	M	0-2	\$10.00
92507TL	M	0-2	\$10.00
92508TL	M	0-2	\$3.00
92510TL	M	0-2	\$10.00
97003TL	M	0-2	\$10.00
97004TL	M	0-2	\$10.00
97001TL	M	0-2	\$10.00
97002TL	M	0-2	\$10.00
97010TL	M	0-2	\$10.00
97012TL	M	0-2	\$10.00
97014TL	M	0-2	\$10.00
97016TL	M	0-2	\$10.00
97018TL	M	0-2	\$10.00
97020TL	M	0-2	\$10.00
97022TL	M	0-2	\$10.00
97024TL	M	0-2	\$10.00
97026TL	M	0-2	\$10.00
97028TL	M	0-2	\$10.00
97032TL	M	0-2	\$10.00
97033TL	M	0-2	\$10.00
97034TL	M	0-2	\$10.00
97035TL	M	0-2	\$10.00
97036TL	M	0-2	\$10.00
97110TL	M	0-2	\$10.00
97112TL	M	0-2	\$10.00

Procedure Code/Modifier	Type of Service	Restrictions	Maximum Allowed Amount
97113TL	M	0-2	\$10.00
97116TL	M	0-2	\$10.00
97124TL	M	0-2	\$10.00
97140TL	M	0-2	\$10.00
97504TL	M	0-2	\$10.00
97520TL	M	0-2	\$10.00
97530TL	M	0-2	\$10.00
97532TL	M	0-2	\$10.00
97533TL	M	0-2	\$10.00
97535TL	M	0-2	\$10.00
97542TL	M	0-2	\$10.00
97545TL	M	0-2, Progress Notes	MP
97546TL	M	0-2, Progress Notes	MP
97750TL	M	0-2	\$10.00
97039TL	M	0-2, Progress Notes	MP
97139TL	M	0-2, Progress Notes	MP
97799TL	M	0-2, Progress Notes	MP